

Status: Finalized

I. Center Identification

Organization Name: MULTI SPECIALTY SURGERY CENTER

Street Address: 10601 N. Meridian St STE 100

City: Indianapolis

County: Hamilton

Administrator Name: Jon Schaefer

Administrator Email: jschaefe@iuhealth.org

ASC Web Address:

Fiscal Year: 2016

Accredited: • Yes • No

Name of Accrediting Body: AAAHC

Deemed Status: O Yes O No

Corporate Tax Status: • For Profit • Non Profit

II. Identification of Surgical Resources

Number of operating rooms	3	
Number of procedure rooms	0	

III. Utilization Statistics

A. Total Patients and Procedures				
Time Period	Number of Patients	Number of Procedures		
Persons Served in twelve-month period	2309	2720		
B. Ten Most Frequent Surgical Procedures Perfo	ormed			
CPT Code		Total Procedures		
67108		240		
64483		175		
67042		158		
67113		146		
64635		134		
58662		103		
67040		68		

62310	64
64494	64
31571	61

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	2
a surgical encounter.	